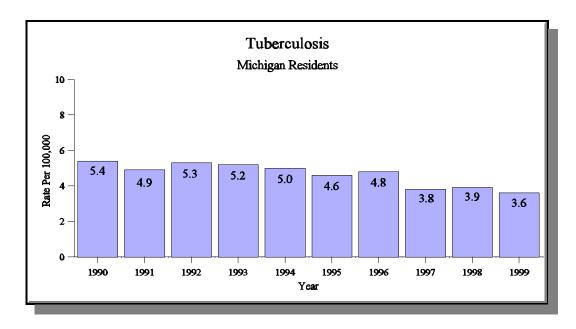
### **Focused Indicators**

## Morbidity and Mortality *Tuberculosis*



Source: Division of Disease Control, MDCH

### How are we doing?

Tuberculosis (TB) is a communicable disease that is spread through airborne respiratory secretions (or droplets), such as a cough or a sneeze. Persons in close contact with persons with infectious TB are at greater risk for infection. TB mainly affects the lungs and can possibly spread to bones and other parts of the body. TB can stay in the human body for many years before causing active disease.

From 1990 to 1999, the number of tuberculosis cases in Michigan decreased from 506 to 351 cases per year. The 1999 tuberculosis case rate was 3.6 per 100,000 population. During the past 10 years, deaths due to all forms of TB have remained stable with 33 deaths in 1998.

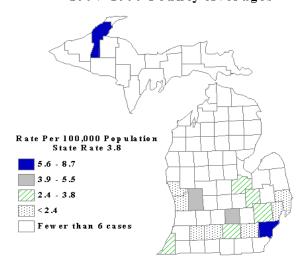
## How does Michigan compare with the U.S.?

Michigan's tuberculosis rate has been consistently lower than the national rate. In 1999, the U.S. rate of 6.4 was higher than Michigan's rate of 3.6. Michigan ranked 33<sup>rd</sup> among the states for tuberculosis rate, with number one having the highest rate.

# How are different populations affected?

The highest age-specific TB incidence rates are among the elderly. Other groups at higher risk of contracting TB are the homeless, alcoholics and substance abusers, those infected with HIV/AIDS, and those born in countries with a high prevalence of TB. Members of these groups are at higher risk if they live in an urban setting.

#### Tuberculosis Incidence Rates 1997-1999 County Averages



### What other information is important to know?

Two preventive measures are used against the spread of tuberculosis. First is the very limited use of a specific vaccine in certain high-risk individuals. The second involves testing relatives and close friends of a person who tests positive for tuberculosis. Early detection diminishes the risk of spreading the disease by allowing for early treatment and isolation.

If properly treated, tuberculosis caused by drug-susceptible strains is curable in virtually all cases. If untreated, the disease is fatal in more than half the cases within five years. The incidence of drug-resistant TB has been increasing during the 1990s.

## What is the Department of Community Health doing to affect this indicator?

The department is actively working to decrease the prevalence of tuberculosis and its adverse effects on those infected. The TB control program maintains the statewide registry for TB cases and provides consultation and guidance for all other aspects of TB control. One of the main functions of TB control is to educate local TB staff and ensure that the appropriate measures are taken to control tuberculosis. Each local health jurisdiction is required to maintain a tuberculosis control program. These programs must provide for the treatment and diagnosis of tuberculosis and examination of contacts of those infected with tuberculosis. The department provides a statewide testing program for rapid and accurate diagnosis of TB and identification of effective anti-microbial agents appropriate for treatment.

Last Updated: January 2001

## **Tuberculosis Rates**

by County of Residence, Michigan Residents,1997-1999

| County of Residence | Rate |
|---------------------|------|
| Michigan            | 3.8  |
|                     |      |
| Wayne County        | 8.7  |
| City of Detroit     | 15.3 |
| Houghton County     | 5.6  |
| Kent County         | 4.4  |
| Ingham County       | 4.5  |
| Genesee County      | 3.7  |
| Berrien County      | 3.5  |
| Oakland County      | 3.5  |
| Saginaw County      | 3.5  |
| Jackson County      | 3.2  |
| Macomb County       | 2.3  |
| Ottawa County       | 2.3  |
| Washtenaw County    | 2.2  |
| Calhoun County      | 2.1  |
| Muskegon County     | 1.8  |
| St. Clair County    | 1.7  |
| Kalamazoo County    | 1.4  |

Note: Rates per 100,000 population.

**Source:** Bureau of Epidemiology, MDCH.

Last Updated: January 2001